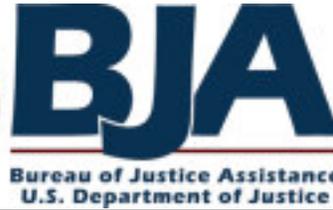


PREA AUDIT: AUDITOR'S SUMMARY REPORT

ADULT PRISONS & JAILS



[Following information to be populated automatically from pre-audit questionnaire]

Name of facility:	Albert C. Wagner Youth Correctional Facility		
Physical address:	500 Ward Avenue, Chesterfield, New Jersey 08515		
Date report submitted:	7/3/14		
Auditor Information Diane Lee – The Nakamoto Group			
Address:	11820 Parklawn Drive, Suite 240 Rockville, MD 20852		
Email:	Diane.lee@nakamotogroup.com		
Telephone number:	301-468-6535		
Date of facility visit:	June 4, 5 and 6, 2014		
Facility Information			
Facility mailing address: (if different from above)	P.O. 500, Bordentown, NJ 08505		
Telephone number:	609-298-0500		
The facility is:	<input type="checkbox"/> Military	<input type="checkbox"/> County	<input type="checkbox"/> Federal
	<input type="checkbox"/> Private for profit	<input type="checkbox"/> Municipal	<input checked="" type="checkbox"/> State
	<input type="checkbox"/> Private not for profit		
Facility Type:	<input type="checkbox"/> Jail	<input checked="" type="checkbox"/> Prison	
Name of PREA Compliance Manager:	James Stigliano	Title: Assistant Superintendent	
Email address: James.stigliano@DOC.STATE.NJ.US		Telephone number:	609-291-1637
Agency Information			
Name of agency:	New Jersey Department of Corrections		
Governing authority or parent agency: (if applicable)	State of New Jersey		
Physical address:	Whittlesly Road, Trenton, New Jersey 08625		
Mailing address: (if different from above)	PO Box 863, Trenton, NJ 08625		
Telephone number:	609-292-4036		

Agency Chief Executive Officer			
Name:	Gary M. Lanigan	Title:	Commissioner
Email address:	Gary.Lanigan@DOC.state.nj.us	Telephone number:	609-292-4036
Agency-Wide PREA Coordinator			
Name:	Douglas Gerardi	Title:	Director Policy and Planning
Email address:	Douglas.Gerardi@DOC.state.nj.us	Telephone number:	609-826-5625

AUDIT FINDINGS

NARRATIVE:

The site visit for PREA audit of the Albert C. Wagner Youth Correctional Facility was conducted on June 4, 5 and 6, 2014 to determine compliance with the Prison Rape Elimination Act standards finalized August 2012. Before the audit, the auditor interviewed Commissioner Gary M. Lanigan and the state Agency-Wide PREA Coordinator, Douglas Gerardi, at the New Jersey Department of Corrections (NJDOC) headquarters in Trenton, New Jersey. Present during the interview was Judith A. Lang, Chief of Staff. During the audit, the auditor toured the facility and conducted formal staff and inmate interviews.

The auditor interviewed 10 inmates (10 random inmates from all of the housing units). Three of the inmates interviewed were from the internal At Risk Inmates/Weekly Listing indicating that they have previously been a victim. This listing is developed from the Central Office and sent to all facilities weekly to help them identify and properly house both victims and perpetrators of prior sexual abuse. They also have a PREA Alert list which is sent every time one of the identified inmates moves to another facility through the PREA Movement Notice.

In addition, the auditor questioned 18 staff (9 specialized staff and 10 random Correctional Officers from each shift), about PREA training, how to report, to whom to report, filing reports, available interventions, conducting interviews, evidence collection, follow up, and monitoring retaliation. Specialized staff interviewed included the Administrator, PREA compliance manager, one investigator, human resource manager, training Lieutenant, Mental Health Supervisor, Assistant Superintendent of Education, Regional Medical Administrator and a Major. The medical and mental health staff at the facility is contracted through Rutgers University of Correctional Health.

An entrance meeting was held with the following persons in attendance: Judith Lang, Chief of Staff; Douglas Gerardi, NJDOC PREA Coordinator; John Cunningham, Administrator; Robert Chetirkin, Associate Administrator; James Stigliano, Assistant Superintendent/PREA Compliance Manager; Robert Karkosa, Special Investigations Division and Dave Calderon, Special Investigations Division.

There were currently 1,015 male inmates at the facility. Following the entrance meeting, I toured the facility from 1:15 P.M. to 5:30 P.M., Eastern Standard Time. In the last calendar year, there were 5 sexual assault/harassment allegation cases of which all were determined to be unfounded.

DESCRIPTION OF FACILITY CHARACTERISTICS:

The facility is located on 560 acres shared with Garden State Youth Correctional Facility, on Ward Avenue, Chesterfield Township in Burlington County, New Jersey. Albert C. Wagner Youth Correctional Facility opened in 1934 and was renovated in 2002. Its population consists of male felons ages 18-30 whom are housed in both cells (1-2 inmates) and dormitory settings (50-117 inmates). Approximately 450 acres of the land are cultivated for the Department of Corrections Farm Operations. Programs for mental health, group counseling, and academic and vocational education are available. Specific work assignments and program recommendations are made by the institution's classification committee based on individual needs.

A 1.2 mile perimeter road encircles the fenced in area. The facility houses all security levels. Within the secured fenced in area there are housing buildings. The main building houses medium security with approximately 849 inmates. Adjacent to the main facility is a 290-bed administrative close custody unit the housing maximum security inmates and inmates place under administrative segregation. In addition, there is a 166-bed minimum security unit. The institution has its own water, steam and sewage services. Steam is used for the main supply of hot water and heat. Normal electrical power supply is from Public Service Electric with a back-up generator. The mission of the New Jersey Department of Corrections is to protect the public by operating safe, secure, and humane correctional facilities. The mission is realized through effective supervision, proper classification, appropriate treatment of offenders, and by providing services that promote successful reentry into society.

The auditor found the staff and inmates to be very well aware of PREA. The staff was very knowledgeable about their responsibilities to ensure a safe facility. They were aware of reporting responsibilities, preservation of evidence, as well as dealing with victims of sexual assault and/or sexual harassment. The staff has all had extensive training on how to identify signs of sexual assault/harassment and how to deal and treat victims of sexual assault and or sexual harassment.

SUMMARY OF AUDIT FINDINGS:

When the on-site audit was completed, an exit meeting was held. While I could not give the facility a final finding, as there were some issues needing further documentation and clarification, I did discuss areas where they had questions as to the facility's and the department's compliance with specific standards. I gave an overview of the audit and thanked the Albert C. Wagner Youth Correctional Facility staff for their hard work and commitment to the Prison Rape Elimination Act.

Number of standards exceeded:	4
Number of standards met:	39
Number of standards not met:	0
Not Applicable:	0

§115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The Agency exceeds the standard with their policies and practice. Policies include NJAC 10A:4-12.2 Zero Tolerance Policies of the Department of Corrections, NJDOC Level 1 IMP IMM.001.PSA.001 Prison Sexual Assault, NJDOC Level 1 IMP PCS.001.PREA.AC PREA Agency Coordinator, NJDOC Level 1 IMP PCS.001.PREA ICM PREA Institutional Compliance Manager, and NJDOC Policy IMM.001.004 Zero Tolerance. The facility does not conduct cross-gender strip searches or cross-gender visual body cavity searches. Through the use of the Central Office developed PREA courtesy alert electronic system of notification for both the PREA Alert list and PREA Movement notice they exceed the requirements trying to prevent, detect and respond to sexual abuse and sexual harassment. The recommendations from the alerts can include the following but are not limited to: special housing conditions, special treatment conditions, and specific recommendations for follow up. They have also developed a very informative and thorough Quik Series booklet called PREA Overview/Sexual Abuse Victim Response which is available for all staff to carry with them at all times.

§115.12 - Contracting with other entities for the confinement of inmates

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The agency contracts with nonprofit agencies to provide Residential Community Release Halfway houses for inmates released from Albert C. Wagner Youth Correctional Facility. They have administrative responsibility over six of the facilities. The agency requires that they adopt and comply with PREA standards. They also regularly monitor the contractor's compliance with PREA standards.

§115.13 – Supervision and Monitoring

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

- Does Not Meet Standard (requires corrective action)

The following policies meet this standard: NJDOC Policy 3301 Post Trick Analysis/Baseline Staffing, NJDOC Policy CUS.001.011 Searches of Inmates and Facilities and NJDOC Level 1 IMP CUS.001.SEA.01. Administrator Cunningham reviews the institutional staffing plan annually and ensures that there is always the proper staffing level or a post would be closed. Documentation of unannounced rounds that cover all shifts was reviewed. There is an extensive video camera system in place and they are planning to add cameras to housing units and the recreation areas.

§115.14 – Youthful Inmates

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Not Applicable - They do not house youth inmates at this facility.

§115.15 – Limits to Cross-Gender Viewing and Searches

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Agency/facility does not conduct cross-gender strip searches or cross-gender visual body cavity searches. The following policies meet the requirements of the standard: NJDOC Policy CUS.003.001 Gender Restrictions of Custody Posts and NJDOC Policy CUS.001.011 Searches of Inmates & Facilities.

Staff of the opposite gender is required to announce their presence when entering the inmate-housing unit(s) by stating “female on unit”. This is also noted in the log book and is in the post orders. This was documented during interviews with staff and inmates, as well as recorded in housing unit log books. Privacy notices are posted in each housing unit. Staff is all trained on conducting strip searches of transgender and intersex inmates in a professional manner. The curriculum and training records were reviewed.

§115.16 – Inmates with Disabilities and Inmates who are Limited English Proficient

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The DOC takes appropriate steps to ensure inmates with disabilities and inmates with limited English proficiency have an opportunity to participate in and benefit from the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. PREA handouts and inmate handbooks are in English and Spanish. The following policies ensure compliance with this standard: NJDOC Policy SUP.004.001 LEP Language Assistance: Bilingual Staff & Use of Language Line, NJDOC Policy IMM.002.003 ADA, NJDOC Level 1 IMP PCS.001.DFH.01 Deaf or Hard of Hearing Inmates 2013 Language Line Contract and the NJDOC Level 1+3 MED.AGP.002 Information on Health policy. There have been on instances during this report period where inmate interpreters, readers or other types of inmate assistants were used.

§115.17 – Hiring and Promotion Decisions

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Based on interviews with HR all components of this standard are being met. Operating procedures to meet this standard include NJDOC Policy PSM.001.001 Reporting of Arrests, Summons, Incarcerations, NJDOC Policy PSM.001.011 Staff Selections and Promotions, NJDOC Policy ADM.006.007 Pre-Employment Background Checks, and NJDOC Level 1 IMP PSM.SSP.003 Panel Interviews. The NJ DOC conducts background checks at least every five years for current permanent employees, every three years for contractors, and annually for temporary employees and volunteers. The background check is completed by the Special Investigations Division at the time the NJ DOC ID card is renewed. All employees/contractors have recently had their criminal background check completed again.

§115.18 – Upgrades to Facilities and Technology

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Not Applicable - They have not had any upgrade to facilities or technology during this report period.

§115.21 – Evidence Protocol and Forensic Medical Examinations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The New Jersey Department of Corrections healthcare staff follows the institution's written plan for responding to allegations of sexual assault of inmates. The assaulted inmate is transported to the Emergency Department at Virtua of Mount Holly Hospital which is

properly equipped to assess (i.e. SANE Nurse), treat, provide required prophylaxis, and gathers forensic evidence. Healthcare staff is not involved in the management or treatment of sexual assault cases unless it is necessary to stabilize the inmate before the transfer to the appropriate community facility. The New Jersey Special Investigations Unit is also notified immediately and would be present at the hospital for the investigation. Policies and interviews with medical and mental health staff support the compliance with this standard. There has been one allegation over this report period where forensic medical exam was conducted and found to have negative results for sexual abuse.

§115.22 – Policies to Ensure Referrals of Allegations for Investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Policies that meet this standard include: NJDOC Policy ADM.006.011 Investigations by the Special Investigations Division, NJDOC Policy IMM.001.004 Zero Tolerance Prison Sexual Assault, NJDOC Level 1 IMP ADM.006.SID.014 Sexual Assault (Confidential), NJDOC Level 1 IMP CUS.001.CSM.01 Crime Scene Management, NJDOC Level 1 IMP IMM.001.PSA.001 Prison Sexual Assault, and NJDOC Level 1 IMP ADM.006.SID.035. All allegations are referred to the Special Investigations Division for review. An administrative or criminal investigation is completed on all allegations of sexual abuse and sexual harassment. During this audit period there have been 5 investigations. The Auditor reviewed all of the investigations that had been conducted.

§115.31 – Employee Training

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Agency and facility policies that address this standard include; NJDOC Policy ADM.010.004 Standards of Professional Conduct: Staff/Inmate Over Familiarity, NJDOC Level 1 IMP and IMM.001.PSA.001 Prison Sexual Assault. I reviewed the training curriculum for Custody PREA Training (Powerpoint & Signature Sheet), Civilian PREA Training (Powerpoint & Signature Sheet), PREA Refresher (Biennial) for NJDOC Employees and the Quik Series Booklet PREA Overview/Sexual Assault Victim Response (Signed Receipt-All Employees). . All staff interviewed indicated that they received the required PREA training.

§115.32– Volunteer and Contractor Training

- Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Reviewed contractor and volunteer sign-in sheets for training received.

§115.33 – Inmate Education

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

PREA Posters are displayed throughout the facility in prominent areas with phone number to call to report abuse. The facility inmate handbook covers the PREA information. Inmate education is also completed by showing a video at reception and additional information. The education is given by the Education Department and the Ombudsman assigned to the facility. The inmates sign an acknowledgement of having received the training. Interviews with the inmates confirmed that they received the training.

§115.34 – Specialized Training: Investigations

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Investigators have received specialized training developed by Moss Group for conducting sexual abuse investigations and crime scene preservation.

§115.35 – Specialized training: Medical and mental health care

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

All medical and mental health staff has received specialized training presented by both New Jersey DOC and Rutgers University Correctional Health Care on PREA Addressing Sexual Abuse and Harassment of inmates. This training includes issues on victim identification, interviewing, reporting, and interventions for medical and mental health staff. Interviews with the medical and mental health staff confirmed the training was received.

§115.41 – Screening for Risk of Victimization and Abusiveness

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Policies addressing this standard include: NJDOC Level 1+3 MED.IMA.001 Health Appraisals at Reception, NJDOC Level 1+3 MED.MHS.001.002 Mental Health Srvc Reception & Evaluation, NJDOC Level 1+3 MED.MHS.001.001 Access to Mental Health Services, and the Multidimensional Sexual Victimization & Abusiveness Risk Assessment Checklist. Screening for any condition relevant to the Prison Rape Elimination Act of 2003 (PREA) and recording of those findings in the electronic health records system is completed within 24 hours of arrival into Reception. If the inmate is identified as being at risk of sexual victimization or sexual abuse of other inmates, they are seen by medical and mental health staff to determine any PREA monitoring or services needed. If needed, the inmate will be assessed by the psychologist. The psychologist will forward the completed Classification Intake form to the Classification Department which will contain the following: status recommendations, programming needs, anticipated adjustment to incarceration, and housing. Services are provided by individual therapy to both victims and perpetrators. This was verified through interviews with the staff.

§115.42 – Use of Screening Information

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

The facility uses the screening information to determine housing, bed, work, education, and program assignment with the goal of keeping inmates at high risks of being sexually victimized separate from those at high risks of being sexually abusive. Housing and program assignments are done on a case by case basis. They have a thorough system for collecting this information and providing continued re-assessment and follow-up services if needed. The information is also monitored through the PREA courtesy alert electronic system of notification for both the PREA Alert list and PREA Movement notice. Placement and programming assignments for transgender and intersex inmates are reassessed at least twice a year. Numerous operating procedures address how the information from the risk screening is used to ensure safety of each inmate.

§115.43 – Protective Custody

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Agency policy NJAC 10A:5-7 Close Custody Units-Temporary Close Custody meets this standard. There was one inmate placed in this status during the report period. If an inmate was

at imminent risk of sexual victimization, they could temporarily be placed in temporary close custody cell until the investigation and alternative means of separation is found.

§115.51 – Inmate Reporting

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Based on staff and inmate interviews, this is clearly documented. The procedures for reporting are clearly stated in the inmate handbook and on posters located throughout the facility. Agency policies that meet this standard are: NJDOC Policy IMM.002.001 Inmate Remedy System, NJDOC Level 1 IMP IMM.002.IRS.001 Inmate Remedy System. NJDOC Level 1 IMM.001.PSA.01 Prison Sexual Assault, and NJDOC Level 1 IMP PCS.001.PREA.OMB Allegations of Sexual Abuse, Assault, Harassment and Retaliation Reported to the Ombudsman.

§115.52 – Exhaustion of Administrative Remedies

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Policy JDOC Level 1 IMP IMM.002.IRS.001 Inmate Remedy System covers the elements of this standard. No grievances were filed in last year that alleged sexual abuse.

§115.53 – Inmate Access to Outside Confidential Support Services

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

A Sexual Assault Free Environment (SAFE) brochure is made available to all inmates. There are numerous outside contacts listed as resources for outside confidential support services.

§115.54 – Third-Party Reporting

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Agency Policy NJDOC Level 1 IMP PCS.001.PREA.OMB Allegations of Sexual Abuse, Assault, Harassment and Retaliation Reported to Ombudsman cover the requirements of this standard. There is also a Website link to PREA Reporting Information for Family/Visitors http://www.state.nj.us/corrections/pdf//PREA/14_Website_Link_and_Visitor_Handout.pdf PREA Information for Family/Visitors available in facility visit centers.

§115.61 – Staff and Agency Reporting Duties

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Agency policy NJDOC Level 1 IMP IMM.001.PSA.001 Zero Tolerance of Prison Sexual Assault and Quik Series Booklet PREA Overview/Sexual Assault Victim Response includes all the components of this standard. This was also verified through interviews with random staff.

§115.62 – Agency Protection Duties

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Agency policies NJDOC Level 1 IMP IMM.001.PSA.01 Prison Sexual Assault, NJAC 10A:5-7 Close Custody Units-Temporary Close Custody, and NJAC 10A 5-5.1 Closed Custody Units-Protective Custody meet this standard. There have been no inmates placed in this status. This was also verified through interviews with random staff.

§115.63 – Reporting to Other Confinement Facilities

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Agency policy NJDOC Level 1 IMP PCS.001.PREA.ICM includes all the components of this standard. This was also verified through interviews with Administrator and PREA Coordinator. There have been no allegations that an inmate was abused while confined at another facility and no allegations of sexual abuse that Albert C. Wagner Youth Correctional Facility received from other facilities.

§115.64 – Staff First Responder Duties

- Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Agency policies NJDOC Level 1 IMP CUS.001.CSM.01 Crime Scene Management, NJDOC level 1+3 IMP MED.MLI.007 Sexual Assault, NJDOC Level 1 IMP IMM.001.PSA.01 Prison Sexual Assault, and NJDOC Level 1 IMP SID 014 include all the components of this standard. This was also verified through interviews with random staff.

§115.65 – Coordinated Response

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Agency policies address this standard in a very detailed effective manner. This was discussed in interviews with the Administrator and the Investigator.

§115.66 – Preservation of ability to protect inmates from contact with abusers

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

All collective bargaining agreements meet the requirements of the standard..

§115.67 – Agency protection against retaliation

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

PREA Compliance Manager Suzanne Lawrence is assigned to monitor for possible retaliation. Her responsibilities include interviewing inmates who previously alleged sexual victimization within 30 days of allegation to ensure they haven't experienced retaliation because of their allegation(s); for at least 90 days following report of sexual assault/harassment allegation, and to monitor by way of periodic status checks. There have been no incidents of retaliation reported in this report period.

§115.68 – Post-Allegation Protective Custody

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Agency policy NJAC 10A:5-7 Close Custody Units-Temporary Close Custody meets this standard. If an inmate was at imminent risk of sexual victimization, they could temporarily be placed in temporary close custody cell until the investigation and alternative means of separation found.

§115.71 – Criminal and Administrative Agency Investigations

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Agency policies that address their standard include: NJDOC Policy ADM.006.011 Investigations by the Special Investigations Division, NJDOC Level 1 IMP ADM.006.SID.035 Investigative Procedures and NJDOC Level 1 IMP ADM.006.SID.014 Procedures for Sexual Assault. The Albert C. Wagner Youth Correctional Facility Investigator conducts investigations within the facility after consulting the Central Office Investigator to determine how to proceed. The SID serves as the NJDOC liaison to all other law enforcement agencies, conducts cooperative investigations in conjunction with federal, state, county and municipal law enforcement agencies and supervise the safety and security of the NJDOC Central Office Complex. All SID Investigators have received special investigation training. All of the investigations were reviewed promptly, thoroughly, and objectively.

§115.72 – Evidentiary Standard for Administrative Investigations

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

This is covered in the SID PREA training curriculum.

§115.73 – Reporting to Inmate

Exceeds Standard (substantially exceeds requirement of standard)

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Agency policy NJDOC Level 1 IMP PCS.001.PREA.AC PREA Agency Coordinator indicates that is the Coordinators responsibility to notify the inmate of the findings. The NJDOC PREA Sexual Abuse Investigation Disposition Report documents the actions taken.

§115.76 – Disciplinary sanctions for staff

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Human Resources Bulletin 84-17 includes all the components of this standard. During this audit period no staff member has been found to violate agency sexual abuse or sexual harassment policies.

§115.77 – Corrective action for contractors and volunteers

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Agency policies that meet this standard are NJDOC Policy PCS.001.003 Volunteer Service Program and NJDOC Level 1 IMP PCS.001.VOL.001 Volunteer Services Operating Procedures. There were no contractors or volunteers during this period that was reported to law enforcement for engaging in sexual abuse of inmates.

§115.78 – Disciplinary sanctions for inmates

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

This is clearly stated in the inmate handbook which addresses all disciplinary sanctions for inmates.

§115.81 – Medical and mental health screenings; history of sexual abuse

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Policies addressing this standard include: NJDOC Level 1+3 MED.IMA.001 Health Appraisals at Reception, NJDOC Level 1+3 MED.MHS.001.002 Mental Health Svcs Reception & Evaluation, NJDOC Level 1+3 MED.MHS.001.001 Access to Mental Health Services, and the Multidimensional Sexual Victimization & Abusiveness Risk Assessment Checklist. Screening for any condition relevant to the Prison Rape Elimination Act of 2003 (PREA) and recording of those findings in the electronic health records system is completed within 24 hours of arrival into Reception. If the inmate is identified as being at risk of sexual victimization or sexual abuse of other inmates, they are seen by medical and mental health staff to determine any PREA monitoring or services needed. If needed, the inmate will be assessed by the psychologist. The psychologist will forward the completed Classification Intake form to the Classification Department which will contain the following: status recommendations, programming needs, anticipated adjustment to incarceration, and housing. This was verified through interviews with the staff. Through interviews with specialized staff, the facility has a thorough system for collecting this information and also has the capacity to provide continued re-assessment and follow-up services if needed.

§115.82 – Access to emergency medical and mental health services

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

A wide range of treatment services are offered to every victim without financial cost while at the facility. In addition, at the time of release from NJ DOC, aftercare services will be arranged for any active mental health disorder in accordance with current procedures for release planning. When mental health determines that follow up services are warranted relative to the sexual assault, separate from mental health needs, referrals will be made in accordance with recommendations reported by the SAFE/SANE counselor and/or other hospital emergency department staff. Agency policies demonstrate excellent compliance with this standard.

§115.83 – Ongoing medical and mental health care for sexual abuse victims and abusers

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Agency policies meet the standards requirements. Services are provided by individual therapy to both victims and perpetrators. This was verified through interviews with the staff.

§115.86 – Sexual abuse incident reviews

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Agency policies NJDOC Policy PCS.001.005 PREA:Sexual Assault Advisory Council and NJDOC Level 1 IMP PCS.001.PREA.001 Sexual Assault Advisory Council meet this standard. Committee members shall consist of, but are not limited to, a representative of the following departments: agency PREA Coordinator (Executive staff member appointed by Commissioner), Division of Operations, Special Investigations Division. Office of Community Programs and Outreach Services, Office of Victim Services, Office of Policy and Planning, Office of Transitional Services, Mental Health Services, Medical Services and Corrections Ombudsman.

§115.87 – Data Collection

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

This is covered in NJDOC Policy PCS.001.005 PREA: Sexual Assault Advisory Council. The NJDOC publishes an annual report regarding PREA-related incidents and, where necessary, plans to improve the Department's prevention, detection and response efforts. The Department regularly conducts sexual abuse/assault incident reviews to determine if changes to or improvements in environmental, procedural, staffing and monitoring technology factors are required.

§115.88 – Data Review for Corrective Action

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

The agency reviews the data collected to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies; and to identify problem areas and take

corrective actions. An annual report with comparisons from previous years and corrective actions is published, and posted on the New Jersey DOC website.

§§115.89 – Data Storage, Publication, and Destruction

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

An annual report with comparisons from previous years and corrective actions is published, and posted on the New Jersey DOC website:<http://www.state.nj.us/corrections/pages/PREA/PREA.html>.

AUDITOR CERTIFICATION:

The auditor certifies that the contents of the report are accurate to the best of his/her knowledge and no conflict of interest exists with respect to his or her ability to conduct an audit of the agency under review.

Diane Lee

July 3, 2014

Auditor Signature

Date